

DECLARATION FOR PATENT APPLICATION

Docket Number (Optional)

MR1035-490

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled METHOD AND APPARATUS FOR VIDEO COMPRESSION AND RESTRUCTURING, the specification of which

is attached hereto unless the following box is checked:

☐ was filed on _____ as United States Application Number or PCT International Application Number _____ and was amended on _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR § 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. § 119(a)-(d) or § 365(b) of any foreign application(s) for patent or inventor's certificate, or § 365(a) of any PCT International application which designated at least one country other than the United States, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or PCT International application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application(s)

Priority Not Claimed

<u>87115328</u>	<u>Taiwan, R.O.C.</u>	<u>15/09/98</u>	<input type="checkbox"/>
(Number)	(Country)	(Day/Month/Year Filed)	
_____	_____	_____	<input type="checkbox"/>
(Number)	(Country)	(Day/Month/Year Filed)	

I hereby claim the benefit under 35 U.S.C. § 119(e) of any United States provisional application(s) listed below.

(Application Number) _____ (Filing Date) _____

(Application Number) _____ (Filing Date) _____

I hereby claim the benefit under 35 U.S.C. § 120 of any United States application(s), or § 365(c) of any PCT International application designating the United States, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. § 112.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR § 1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application.

(Application Number) _____ (Filing Date) _____ (Status -- patented, pending, abandoned)

(Application Number) _____ (Filing Date) _____ (Status -- patented, pending, abandoned)

I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: MORTON J. ROSENBERG, ESQ., REG. #26,049;
DAVID I. KLEIN, ESQ., REG. #33,253; JUN Y. LEE, ESQ., REG. #40,262

Address all telephone calls to Morton J. Rosenberg at telephone number 410-465-6678

Address all correspondence to Rosenberg, Klein & Bilker
3444 Ellicott Center Drive-Suite 105
Ellicott City, Maryland 21043

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole or first inventor (given name, family name) Hsin Chia FU

Inventor's signature Hsin Chia Fu Date 9/28/98

Residence same as post office address Citizenship Taiwan, R.O.C.

Post Office Address 222 N. PINCKNEY ST. #2 Madison, WI. 53707, U.S.A.

Full name of second joint inventor, if any (given name, family name) Chein Hsun WANG

Second Inventor's signature Chein Hsun Wang Date 9/28/98

Residence same as post office address Citizenship Taiwan, R.O.C.

Post Office Address No. 18, Chu-Tsun II Road, Lin 22, Ko-Yung Li, East Dist., Hsinchu City, Taiwan, R.O.C.

☒ Additional inventors are being named on separately numbered sheets attached hereto.

Full Name	Yih Woei LIANG
Inventor's Signature	<i>Yih Woei Liang</i>
Residence	No. 24-1, Industry East 4Rd., Science Based Industrial Park, Hsin-Chu, Taiwan, R.O.C.
Citizenship	Taiwan, R.O.C.
Post Office Address	

Full Name	
Inventor's Signature	
Residence	
Citizenship	
Post Office Address	

Full Name	
Inventor's Signature	
Residence	
Citizenship	
Post Office Address	

COPY

Full Name	
Inventor's Signature	
Residence	
Citizenship	
Post Office Address	

Applicant or Patentee: HSIN CHIA FU, ET AL.

Attorney's

Serial or Patent No.: _____

Docket No.: MR1035-490

Filed or Issued: _____

Title: METHOD AND APPARATUS FOR VIDEO COMPRESSION AND RESTRUCTURING

**VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL ENTITY STATUS
(37CFR 1.9(f) & 1.27(c))--SMALL BUSINESS CONCERN**

I hereby declare that I am

☒ the owner of the small business concern identified below:

☐ an official of the small business concern empowered to act on behalf of the concern identified below:

NAME OF SMALL BUSINESS CONCERN Mentor Data System Inc.

ADDRESS OF SMALL BUSINESS CONCERN No. 24-1, Industry East 4Rd., Science Based Industrial Park, Hsin-Chu, Taiwan, R.O.C.

I hereby declare that the above identified small business concern qualifies as a small business concern as defined in 13 CFR 121.12 and reproduced in 37 CFR 1.9(d), for purposes of paying reduced fees to the United States Patent and Trademark Office, in that the number of employees of the concern, including those of its affiliates, does not exceed 500 persons. For purposes of this statement, (1) the number of employees of the business concern is the average over the previous fiscal year of the concern of the persons employed on a full-time, part-time or temporary basis during each of the pay periods of the fiscal year, and (2) concerns are affiliates of each other when either, directly or indirectly, one concern controls or has the power to control the other, or a third party or parties controls or has the power to control both.

I hereby declare that rights under contract or law have been conveyed to and remain with the small business concern identified above with regard to the invention, entitled METHOD AND APPARATUS FOR VIDEO COMPRESSION AND RESTRUCTURING by inventor(s) Hsin Chia FU; Chein Hsun WANG; Yih Woei LIANG described in _____

☒ the specification filed herewith

☐ application serial number _____, filed _____

☐ patent number _____, issued _____

If the rights held by the above identified small business concern are not exclusive, each individual, concern or organization having rights in the invention is listed below and no rights to the invention are held by any person, other than the inventor, who would not qualify as an independent inventor under 37 CFR 1.9(c) if that person made the invention, or by any concern which would not qualify as a small business concern under 37 CFR 1.9(d), or a nonprofit organization under 37 CFR 1.9(e). NOTE: Separate verified statements are required from each named person, concern or organization having rights to the invention averring to their status as small entities. (37 CFR 1.27)

NAME _____

ADDRESS _____

☐ INDIVIDUAL ☐ SMALL BUSINESS CONCERN ☐ NONPROFIT ORGANIZATION

NAME _____

ADDRESS _____

☐ INDIVIDUAL ☐ SMALL BUSINESS CONCERN ☐ NONPROFIT ORGANIZATION

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b))

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

NAME OF PERSON SIGNING Walter F.K. NI

TITLE OF PERSON IF OTHER THAN OWNER PRESIDENT

ADDRESS OF PERSON SIGNING No. 24-1, Industry East 4Rd., Science Based Industrial Park, Hsinchu, Taiwan, R.O.C.

SIGNATURE Walter F.K. NI DATE 9/28/98

Applicant or Patentee: HSIN CHIA FU, ET AL.
Serial or Patent No.: _____
Filed or Issued: _____
Title: METHOD AND APPARATUS FOR VIDEO COMPRESSION AND RESTRUCTURING

Attorney's
Docket No.: MR1035-490

**VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL ENTITY STATUS
(37CFR 1.9(f) & 1.27(c))—SMALL BUSINESS CONCERN**

I hereby declare that I am

- ☒ the owner of the small business concern identified below:
☐ an official of the small business concern empowered to act on behalf of the concern identified below:

NAME OF SMALL BUSINESS CONCERN AdaptiveSoft
ADDRESS OF SMALL BUSINESS CONCERN 222 N. PINCKNEY ST. #2 Madison, Wi, 53707, U.S.A.

I hereby declare that the above identified small business concern qualifies as a small business concern as defined in 13 CFR 121.12 and reproduced in 37 CFR 1.9(d), for purposes of paying reduced fees to the United States Patent and Trademark Office, in that the number of employees of the concern, including those of its affiliates, does not exceed 500 persons. For purposes of this statement, (1) the number of employees of the business concern is the average over the previous fiscal year of the concern of the persons employed on a full-time, part-time or temporary basis during each of the pay periods of the fiscal year, and (2) concerns are affiliates of each other when either, directly or indirectly, one concern controls or has the power to control the other, or a third party or parties controls or has the power to control both.

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NAME _____
ADDRESS _____
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NAME OF PERSON SIGNING Hsin Chia FU
TITLE OF PERSON IF OTHER THAN OWNER PRESIDENT
ADDRESS OF PERSON SIGNING 222 N. PINCKNEY ST. #2 Madison, Wi, 53707, U.S.A.

SIGNATURE Hsin Chia fu DATE 9/28/98